

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	hr	67814	8/01/12
O.I.P.E. CLASSIFIER		13	9-11-00
FORMALITY REVIEW	CJA	835	10/04/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

- ✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) ... Canceled  
÷ ..... Restricted
- N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here  
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